JAN 3 1 2005

PTO/SB/22 (12-04)
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DEMINION	FOR EXTENSION OF TIME UNDER	Docket Number (Optiona	Docket Number (Optional)				
(Fees	FY 2005 pursuant to the Consolidated Appropriations Act,	HRL045					
Application Number 09/764,668			Filed 01/24/2005	Filed 01/24/2005			
For Scalable Unidirectional Routing With Zone Routing Protocol Extensions for Mobile Ad-Hoc Networks							
Art Unit 26	63	Examiner Mace, E	Examiner Mace, Brad Thomas				
This is a req application.	uest under the provisions of 37 CFR 1.136	6(a) to extend the pe	riod for filing a reply in the	above identified			
The request	ed extension and fee are as follows (check	time period desired	and enter the appropriate	e fee below):			
		<u>Fee</u>	Small Entity Fee				
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$			
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$			
X	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>1020.00</u>			
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$			
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$			
Applica	Applicant claims small entity status. See 37 CFR 1.27. 02/02/2005 MW0LDGE1 00000042 09764668						
A check in the amount of the fee is enclosed.			C:1253	1020.00 Op			
Payment by credit card. Form PTO-2038 is attached.							
The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2691 I have enclosed a duplicate copy of this sheet.							
WARNING: Information on this form may become public. Credit card information should not be included on this form.							
Provide credit card information and authorization on PTO-2038.							
I am the applicant/inventor.							
assignee of record of the entire interest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number 41,350							
attorney or agent of record. Registration Number 41,330							
	Registration number if acting under	er 37 CFR 1.34					
-				01/24/2005			
	Signature			Date			
Cary Tope-McKay			(310) 589-8158 Telephone Number				
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one							
	res of all the inventors or assignees of record of the en uired, see below.	nure interest or their repres	entative(s) are required. Submit r	numple forms if more than one			
Total	of forms are	e submitted.					

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

METHOD OF PAYMENT (check all that apply) Check	FEE TRANSMITTAL For FY 2005 Application Number 09/764, Filing Date 01/18/2 First Named Inventor Krishna Examiner Name Mace, E Art Unit 2663 Attorney Docket No. HRLO4! METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify); Deposit Account Deposit Account, the Director is hereby authorized to: (check all that a	64,668 8/2001 hnamurthy ee, Brad Tho	
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